STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

CCS PERSONNEL FILE REVIEW

GH NAME:	AUDIT PERIOD:

	(CCS AND	FIRST LIN	E SUPERV	ISORS			
WORKER NAME	EXPER	EXPERIENCE VERIFIED (Y/N)			N)	EDUCATION		COMMENTS
	Reported	Verified	F/P submitted	CAIC submitted	Assoc.	Reported	Verified	COMMENTS
			Gustimetou	Cabinita				